

# Metro Daycare Water Sampling Lead Analysis Report

#### 1. INTRODUCTION

### 1.1. GENERAL

This report presents the results of our water sampling performed at the site of Metro Daycare, 13400 Scheafer Hwy., Detroit, MI., on May 19th, 2016. The sample results taken in conjunction with this investigation are also presented on Appendix 1.

## 1.2. OBJECTIVES AND SCOPE

In general, the objectives of this investigation were to:

Accurately evaluate water outlets for lead above the EPA Maximum Contaminate Level (MCL).

#### 1.3. AUTHORIZATION

Authorization was provided by phone for our Professional Services by Demetrius Danforth on April 21st. 2016.

### 2. SITE INVESTIGATIONS

## 2.1. FIELD PROGRAM

In order to sample and evaluate water, GSES took six samples, a First Draw sample and a Flush sample, from three different locations on the site.

The field portion of our investigation was under control and continual supervision of an experienced member of our field scientist staff.

### 2.2 LABORATORY TESTING

### **2.2.1.** General

In accordance with ASTM D3559 and the U.S. Environmental Protection Agency guidelines for lead in drinking water at schools and child care facilities, we took two samples: first draw and flush, which is the required testing standard for drinking water lead contamination.



Results of the tests indicate that the water is below the threshold for lead contamination. A copy of the lab report and Chain of Custody is attached (Appendix 1).

## 3. DISCUSSIONS AND RECOMMENDATIONS

### 3.1. DISCUSSIONS OF FINDINGS

The water results are below the threshold for lead contamination.

We appreciate the opportunity of providing this service for you. If you have any questions concerning this report or require additional information, please do not hesitate to contact the undersigned.

Respectfully submitted,

Michael Etters Field Scientist Monica Starks, CIEC

Principal

Council-certified Indoor Environmental Consultant Board-awarded by the American Council for Accredited Certification



Appendix 1, Lab Results, Chain of Custody

## National Testing Laboratories, Ltd

556 South Mansfield, Ypsilanti, MI, 48197-5166 (440) 449-2525, Fax: (440) 449-8585

#### **ANALYTICAL REPORTS**

SAMPLE CODE: 355441 5/27/2016

**Customer:** 

G. S. Group Monica Starks

17800 Woodward Ave

#200

Detroit, MI 48203

Source:

Metro Daycare, DC-01-KC-01-P

Source City: Detroit

Source State:MI

Date/Time Received:

5/20/2016 14:25

Collected by:

M. Etters

The results herein conform to TNI and ISO/IEC 17025:2005 standards, where applicable, unless otherwise narrated in the body of the report. The uncertainty of the test results are available upon request. All Dates and Times are reported as U.S. Eastern Time.

#### Legend

Any 'Level Detected' marked with an asterisk (\*) indicates that the value has exceeded the EPA Maximum Contaminant Level (MCL) or one of the Standards of Quality.

"ND"

This contaminant was not detected at or above our lower reporting limit (LRL)

"NA"

Not Analyzed

"Standard"

This column indicates either the Maximum Contaminant Level (MCL) for EPA Primary Standards or the guideline values for EPA

Secondary Standards.

"LRL"

This column indicates the Lower Reporting Limit, which is the towest level that the laboratory can detect a contaminant.

"DF"

This column indicates the contaminant dilution factor.

Report Notes:

		Units LRL	Level Detected	DF Date/Time Sampled	Date Prepped	Date/Time Analyzed	
1030 Lead 200	.8 0.015	inorganic Anal	ytes - Metals 0.001	1 5/20/2016 07:5		5/25/2016	

These test results may be used for compliance purpose as required.

Analyst Tests
EC 200.8

# National Testing Laboratories, Ltd

556 South Mansfield, Ypsilanti, MI, 48197-5166 (440) 449-2525, Fax: (440) 449-8585

#### **ANALYTICAL REPORTS**

SAMPLE CODE: 355442 5/27/2016

Customer:

G. S. Group Monica Starks

17800 Woodward Ave

#200

Detroit, MI 48203

Source:

Metro Daycare, DC-01-KC-01-F

Source City: Detroit

Source State: MI

Date/Time Received:

5/20/2016 14:25

Collected by:

M. Etters

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Report Notes:

Fed Id # Contaminant	Method Standard	Units LRL	Level Detected	DF Date/Time Sampled	Date Prepped	Date/Time Analyzed	
1030 Lead	200.8 0.015	Inorganic Analy	ytes - Metals ND	1 5/20/2016 07:5	9	5/25/2016	

These test results may be used for compliance purpose as required.

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# National Testing Laboratories, Ltd

556 South Mansfield, Ypsilanti, MI, 48197-5166 (440) 449-2525, Fax: (440) 449-8585

#### **ANALYTICAL REPORTS**

SAMPLE CODE: 355443 5/27/2016

**Customer:** 

G. S. Group Monica Starks

17800 Woodward Ave

#200

Detroit, MI 48203

Source:

Metro Daycare, DC-01-WC-02-P

Source City: Detroit

Source State: MI

Date/Time Received:

5/20/2016 14:25

This column indicates the contaminant dilution factor.

Collected by:

M. Etters

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"DF" Report Notes:

	Units LRL	Level Detected	DF Date/Time Sampled	Date Prepped	Date/Time Analyzed
	Inorganic Analy	utas - Metals	<b>.</b>		1.512/52

These test results may be used for compliance purpose as required.

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EC 200.8

## National Testing Laboratories, Ltd

556 South Mansfield, Ypsilanti, MI, 48197-5166 (440) 449-2525, Fax: (440) 449-8585

#### **ANALYTICAL REPORTS**

SAMPLE CODE: 355444 5/27/2016

**Customer:** 

G. S. Group Monica Starks

17800 Woodward Ave

#200

Detroit, MI 48203

Source:

Metro Daycare, DC-01-WC-02-F

Source City: Detroit

Source State: MI

Date/Time Received:

5/20/2016 14:25

Collected by:

M. Etters

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Report Notes:

Fed Id # Contaminant	Method Standard	Units LRL	Level Detected	DF Date/Time Sampled	Date Prepped	Date/Time Analyzed	
1030 Lead		Inorganic Anal					
1030 Cead	200.8 0.015	mg/L 0.001	0.002	1 5/20/2016 07:5	59	5/25/2016	

These test results may be used for compliance purpose as required.

Analyst Tests
EC 200.8

James Abston, Operations Manager

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#### ANALYTICAL REPORTS

SAMPLE CODE: 355445 5/27/2016

**Customer:** G. S. Group

Monica Starks

17800 Woodward Ave

#200

Detroit, MI 48203

Source:

Metro Daycare, DC-02-CBF-03-P

Source City: Detroit

Source State: MI

Date/Time Received:

5/20/2016 14:25

Collected by:

M. Etters

The results herein conform to TNI and ISO/IEC 17025 2005 standards, where applicable, unless otherwise narrated in the body of the report. The uncertainty of the test results are available upon request. All Dates and Times are reported as U.S. Eastern Time.

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		Inorganic Analy	tes - Metals			
1030 Lead	200.8 0.015	mg/L 0.001	0.002	1 5/20/2016 07:5	i9	5/25/2016

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Analyst Tests EC 200.8

James Abston, Operations Manager

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Page

1 of 1 355445

Lead Only

Date Printed: 5/27/2016 7:54:20 AM

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#### **ANALYTICAL REPORTS**

SAMPLE CODE: 355446 5/27/2016

Customer:

G. S. Group

Monica Starks 17800 Woodward Ave

#200

Detroit, MI 48203

Source:

Metro Daycare, DC-02-CBF-03-F

Source City: Detroit

Source State: MI

Date/Time Received:

5/20/2016 14:25

Collected by:

M. Etters

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		Inorga	nia Anab	/tes - Metals				
PSSPECTORS (Control of the Control o	run ha fin's control management of the analysis of the state of the st	morga	inc Anaiy	raz - Inletsiz			,	
1030 Lead	200.8 0.015	mg/L	0.001	ND	1	5/20/2016 07:	59	5/25/2016

These test results may be used for compliance purpose as required.

Analyst Tests
EC 200.8

# M National Testing Laboratories, Ltd.

Quality Water Analysis

1-800-458-3330

# **General Compliance**

Order Number:

2077502

Order Date:

05/16/2016

Sample Number:

Product:

Lead Only

Sample Pald: No

**Payment Method:** 

355441

Sold To:	TSR: EF	
G. S. Group		For Laboratory Use ONLY
Monica Starks		Lab Accounting Information:
17800 Woodward Ave Detroit	MI 48203	Payment \$:
		Check #:
		Lab Comments/Special Instructions:
Date Sampled : 5 /20/16	2000	
,	Please Use Militery Time, e.g. 3.00pm = 15:00	
Check Time Zone: FEST C		
Client Name: Metro	Day Car L	
Phone Number: 313-8	V	w
Fax Number:		
PWS ID# (if applicable):	J/6	State Forms:
Sample ID or Source: Dc-	01-KC-01-P	Leb Sample Information 2 0 2016
Source Type: Spring	Well Municipal Surface	Date Received:/
Other:		Time Received: 14:25
City & State: Dorod	F Different than Above)	Received By: DF
Sample Collected By:	Nil Discontinuo)	Sample receipt criteria checked & acceptable.  Deviations from acceptable sample receipt criteria noted on PSA form.
Sample Collected By:	Charl 5445 (Please Print)	
Form Completed By:	lichand Bhas	
Additional Commonts: 3 10 Cations So	mpled at this Sci	Rool, this is location 41, First

# M National Testing Laboratories, Ltd.

Quality Water Analysis

1-800-458-3330

# **General Compliance**

Order Number:

2077502

Order Date:

Sample Paid: No

05/16/2016

Sample Number: Product:

Lead Only

Payment Method:

355442

Sold To:	TSR: EF	·
G. S. Group		For Laboratory Use ONLY
Monica Starks		Lab Accounting Information:
17800 Woodward Ave Detroit	MI 48203	Payment \$:
		Check #:
Date Sampled : 5 / 70/	<u> 16</u>	Lab Comments/Special Instructions:
Time Sampled: 7:57	Please Use Military Time, e.g. 3:00pm = 15:00	
Check Time Zone: ☐ EST ☐		
Client Name: Meth	Daycare	
Phone Number: 313	835-4440	
Fax Number:	Norwer was stated as the development of the control	
PWS ID# (if applicable):	N/A	State Forms:
Sample ID or Source:	C-01-KC-01-F	
Source Type: Spring C	☐ Well ☐ Municipal ☐ Surface	Lab Sample Information:  Date Received: 40 2016
City & State: Defroi	(If Different than Above)	Time Received: 1 1 : 25  Received By: DF
Sample Collected By:	(Signature)	Sample receipt criteria checked & acceptable.  Deviations from acceptable sample receipt criteria noted on PSA form.
Sample Collected By:	Please Print)	
Form Completed By:	Michael BATERS	
	Sampled at this Sche	ol, this is location #1,
Elush Sample	·_ \	

# **MATIONAL Testing**Laboratories, Ltd.

Quality Water Analysis

1-800-458-3330

# **General Compliance**

Order Number:

2077502

Order Date:

05/16/2016

Sample Number:

355443

Product:

**Lead Only** 

Sample Paid: No

**Payment Method:** 

Sold To:	TSR: EF	
G. S. Group		For Laboratory Use ONLY
Monica Starks 17800 Woodward Ave		Lab Accounting Information:
Detroit	MI 48203	Payment \$:
		Check #:
Date Sampled : 5 / 20	lb	Lab Comments/Special Instructions:
Time Sampled: 7:52	Please Use Military Time, e.g 3.00pm = 15.00	
Check Time Zone: DEST []	CST	,
Client Name: Metn	Dayca: R	
Phone Number: 313-	835-4440	
Fax Number:		
PWS ID# (if applicable):	D/A	State Forms:
Sample ID or Source: De	e-01-We-02-P	
Source Type: Spring	Well Municipal Surface	Lab Sample Information: MAY \$ 0 2016 Date Received:
Other:		
City & State: Dety	pit Mi. Different than Above)	Time Received: 14: 25  Received By: DF
Sample Collected By	W. (Signature)	Sample receipt criteria checked & acceptable.  Deviations from acceptable sample receipt criteria noted on PSA form.
Sample Collected By:	Yichail Effers	on or tolli.
Form Completed By:	Tichal Biters	
Additional Comments:	upled at this Scho	ol, this is location #2,
- First draw.	•	

# Mational Testing Laboratories, Ltd:

Quality Water Analysis

1-800-458-3330

# **General Compliance**

Order Number:

2077502

Order Date:

05/16/2016

Sample Number:

Product:

**Lead Only** 

Sample Paid: No

**Payment Method:** 

TSR: EF

Sold To:	ISR. LF	
G. S. Group		For Laboratory Use ONLY
Monica Starks		Lab Accounting Information:
17800 Woodward Ave Detroit	MI 48203	Payment \$:
		Check #:
		Lab Comments/Special Instructions:
Date Sampled : <u>5 /26 /</u>	16	
Time Sampled: 7:5	Please Use Military Time, e.g. 3:00pm = 15.00	
Check Time Zone: LEST	CST MST PST	
Client Name: Metn	Daycare	
Phone Number: 313-	835-4440	
Fax Number:		
PVVS ID# (if applicable):	W/A	State Forms:
Sample ID or Source:	-01-WC-02-F	Lob Complete Company of the Company
Source Type: Spring	☐ Well ☐ Municipal ☐ Surface	Lab Sample Information 200 2016  Date Received://
Other:	<u> </u>	
City & State: Dom	oit Mi. (If Different than Above)	Time Received: <u>) 4 : 25</u> Received By: <u>SF</u>
Sample Collected By:	medato	Sample receipt criteria checked & acceptable.  Deviations from acceptable sample receipt criteria noted on PSA form.
Sample Collected By:	Michael Etters	OIT ON IOIII.
Form Completed By:	Michael Effeis	
Additional Comments;	1.1.1.4.01	
Charles 2	sompled at this Scho	ol, this is location #2
- TWAN Jample	C.	
	V*-	

# **M** National Testing Laboratories, Ltd.

Quality Water Analysis

1-800-458-3330

# General Compliance

Order Number:

2077502

Order Date:

05/16/2016

Sample Number:

11111111111355445

Product:

Lead Only

Sample Paid: No

**Payment Method:** 

Cold To:	TSR: EF	
Sold To: G. S. Group		For Laboratory Use ONLY
Monica Starks		Lab Accounting Information:
17800 Woodward Ave Detroit	MI 48203	Payment \$:
Dodok	1711 10200	Check #:
<b></b> .		Lab Comments/Special Instructions:
Date Sampled : 5 / 20 / 1	16	
Time Sampled: 2:52	Please Use Military Time, e.g. 3 00pm ≈ 15:00	
Check Time Zone: VEST	CST ☐ MST ☐ PST	
Client Name: Metro	Hayladaya Amarin a sanan a san	
Phone Number: 313-	835-4440	
Fax Number:	2 + 4 + 4 + 4 + 4 + 4 + 4 + 4 + 4 + 4 +	
PWS ID# (if applicable):	W/16	State Forms:
Sample ID or Source: <u>D</u> e	-02-CBF-03-P	Lab Sample Informational 2 0 2016
Source Type: Spring C	Well Municipal Surface	Date Received:/
City & State: Detr	Oct Mii (If Different than Above)	Time Received: 14:25  Received By: BC
Sample Collected By:	(Signature)	Sample receipt criteria checked & acceptable.  Deviations from acceptable sample receipt criteria noted on PSA form.
Sample Collected By:	Michael Effers (Please Print)	
Form Completed By:	Michal Etters	
additional Comments:	sampled at this Sch	001 this is location #3,
First draw.	. 1	

# Mational Testing Laboratories, Ltd:

Quality Water Analysis

1-800-458-3330

# **General Compliance**

Order Number:

2077502

Order Date:

05/16/2016

Sample Number:

Product:

Lead Only

Sample Paid: No

Payment Method:

TSR: EF Sold To: G. S. Group For Laboratory Use ONLY Monica Starks Lab Accounting Information: 17800 Woodward Ave Detroit Payment \$:\_ MI 48203 Check #: Lab Comments/Special Instructions: Date Sampled : 5, 20, 16 Please Use Military Time, e.g. 3:00pm = 15:00 Check Time Zone: DEST Client Name: Phone Number: Fax Number: PWS ID# (if applicable): State Forms: Sample ID or Source: Lab Sample Information Source Type: Spring Well Municipal Surface **Date Received:** Other. Time Received: City & State: Received By:\_ (If Different than Above) Sample receipt criteria checked & acceptable. Sample Collected By: Deviations from acceptable sample receipt criteria noted on PSA form. Sample Collected By: Form Completed By: